

United States Bankruptcy Court
Southern District of New York
Attn: Lehman Brothers Holdings Inc.
One Bowling Green
New York, NY 10004-1408
USA

marcel.ledergergerber@finanz-logistik.ch
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St. Gallen, 10th december 2014

Transfer of claims / Lehman Brothers Holding / Registration

Dear Sir or Madam

By order of acrevs Bank AG we send you enclosed the following forms:

- Evidence of Transfer (Neue Aargauer Bank to acrevis Bank AG)
- Form 210A
- payment aggregation acrevis Bank AG

Thank you very much for your confirmation of the registration.

With compliments

Finanz-Logistik AG


Marcel Ledergerber


Roman Lengwiler

Copy: Eqiq Bankruptcy Solutions LLC, 757 Third Avenue, 3rd Floor, New York, NY 10017, USA

EVIDENCE OF TRANSFER OF CLAIM

TO: THE DEBTOR AND THE BANKRUPTCY COURT

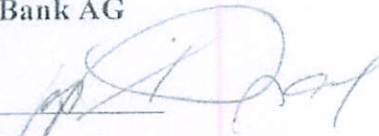


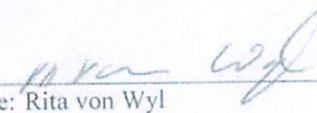
For value received, the adequacy and sufficiency of which are hereby acknowledged, **Neue Aargauer Bank AG** ("Transferor") unconditionally and irrevocably transferred to **Acrevis Bank AG** ("Transferee") all of its right, title, interest, claims and causes of action in and to or arising under or in connection with the portion of its claim **Claim No 55814** relating to the securities with International Securities Identification Numbers listed on Schedule I hereto against Lehman Brothers Holdings, Inc. (the "Debtor"), Chapter 11 Case No.: 08-13555 (JMP) (Jointly Administered), United States Bankruptcy Court for the Southern District of New York (the "Bankruptcy Court").

Transferor hereby waives any objection to the transfer of the claim to Transferee on the books and records of the Debtor and the Bankruptcy Court and hereby waives to the fullest extent permitted by law any notice or right to a hearing as may be imposed by Rule 3001 of the Federal Rules of Bankruptcy Procedure, the Bankruptcy Code, applicable local bankruptcy rules or applicable law. Transferor acknowledges and understands, and hereby stipulates, that an order of the Bankruptcy Court may be entered without further notice to Transferor regarding the transfer of the foregoing claim and recognizing the Transferee as the sole owner and holder of the claim. Transferor further directs the Debtor, the Bankruptcy Court and all other interested parties that all further notices relating to the claim, and all payments or distributions of money or property in respect of claim, shall be delivered or made to the Transferee.

IN WITNESS WHEREOF, this EVIDENCE OF TRANSFER OF CLAIM IS
EXECUTED ON 9 December, 2014.

Neue Aargauer Bank AG

By: 
Name: Adrian Graf
Title: AVP

By: 
Name: Rita von Wyl
Title: AVP

SCHEDULE I

Lehman Programs Securities Related to Transferred Portion of Claim:

ISIN	Court Claim #	Date Claim Filed	Issuer	Number of Units or Currency and Nominal Amount
CH0034774536	55814	October 30, 2009	Lehman Brothers Securities NV	CHF 60,000

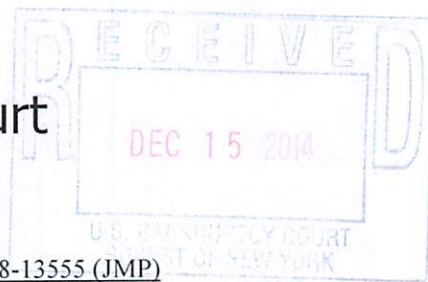
Form 210A (10/06)

United States Bankruptcy Court

Southern District Of New York

In re Lehman Brothers Holdings Inc., et al., Debtors,

Case No. 08-13555 (JMP)



TRANSFER OF CLAIM OTHER THAN FOR SECURITY

A CLAIM HAS BEEN FILED IN THIS CASE or deemed filed under 11 U.S.C. § 1111(a). Transferee hereby gives evidence, attached hereto, and notice pursuant to Rule 3001(e)(2), Fed. R. Bankr. P., of the transfer, other than for security, of the claim referenced in this evidence and notice.

acrevis Bank AG

Name of Transferee

Name and Address where notices
to transferee should be sent:

acrevis Bank AG
c/o Finanz-Logistik AG
Rosenbergstrasse 16
Postfach 661
9004 St. Gallen / Switzerland

Phone: +41 71 242 77 17

Last Four Digits of Acct #: _____

Neue Aargauer Bank AG

Name of Transferor

Court Claim # (if known): 55814

Date Claim Filed: October 30, 2009

Amount of Claim: _____

Portion of Claim Transferred (see

Schedule I): CHF 60'000

Phone: _____

Last Four Digits of Acct. #: _____

Name and Address where transferee
payments should be sent (if different
from above):

Phone: _____

Last Four Digits of Acct #: _____

I declare under penalty of perjury that the information provided in this notice is true and correct to
the best of my knowledge and belief.

By: Finanz-Logistik AG
Transferee/Transferee's Agent

Date: 20141210

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 & 3571.

Lehman Brothers Holdings Claims Processing, PO Box 6389, Portland, OR 97228-6389

Creditor Name: acrevis Bank AG (former swissregiobank AG)

Payment Aggregation Number W0041344

Claim Number(s): 48907

Please Type or Print in the Boxes Below; Do NOT use Red Ink, Pencil, or Staples

PART I: CONTACT INFORMATION

Contact Last Name

L E D E R G E R B E R

Mi

Contact First Name

M A R C E L

Telephone Number (Day)

0 4 1 - 0 7 1 2 4 2 - 7 7 1 7

Telephone Number (Evening) or (Cell)

- - - - -

Email Address

M A R C E L . L E D E R G E @

(Username)

F I N A N Z - L O G I S T I K . C H

(Domain Name)

R B E R

Creditor Name: acrevis Bank AG (former swissregiobank AG)

Payment Aggregation Number: W0041344

Part II: BANK INFORMATION

Account Holder Name (if different than Creditor Name above):

A C R E V I S B A N K A G

Beneficiary Bank Name:

B A N K C I C (S W I T Z E R L A N D) I T D

Country of Bank Account:

S W I T Z E R L A N D

IBAN or Account Number (Required):

C H 4 5 0 8 7 1 0 0 0 0 8 5 4 5 7 2 0 0 2

BIC/SWIFT Code (non-US Banks only):

C I A I C H B B X X X

ABA Routing Code (US Banks Only):

Sort Code (UK/IRL Only):

Other Banking Instructions - Specify Further Credit (FFC) Information Here:

C I A I M I L E H M A N B R O T H E R S

If you need to use an intermediary bank to transfer money, please complete the below:

Intermediary Bank Name:

Country of Intermediary Bank Account:

Intermediary IBAN or Account Number:

BIC/SWIFT Code (non-US Banks only):

ABA Routing Code (US Banks Only):

Sort Code (UK/IRL Only):

Intermediary Bank Instructions

I, the undersigned, am the above-referenced creditor, or an authorized signatory for the above-referenced creditor. (If the signatory is not the above-referenced creditor, please provide a copy of the power of attorney, or a letter on company letterhead granting the authority to make the representation on behalf of the creditor, and provide your title below.) I hereby (1) request that distributions made to the above-referenced creditor be made by wire transfer to the above-referenced bank account, (2) confirm that this account is authorized to receive payment for this claim, and (3) acknowledge that a fee of \$20 for transfers to a U.S. bank account or \$35 for transfers to a non-U.S. bank account will be deducted from each wire.



Signature of Claimant, or Authorized Signatory

Keller Florian

Robert Noll

Print Name of Claimant, or Authorized Signatory (and title, if applicable)

Date: 1 2 - 1 0 - 1 4
M M D D Y Y